PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

plication or Docket Number

10/511896

	·	Ellec						,				
		CLAIMS A	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OF.	OTHER THAN OF SMALL ENTITY	
TOTAL CLAIMS							R	ATE	FEE'	٦ ·	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA		BAS	IC FE	E.	OR	BASIC FEE	1110
TO	OTAL CHARGE	ABLE CLAIMS) ¶ minus 20=		•		×	S 9=		OR	X\$18=	
<u> </u>	DEPENDENT C		5 minus 3 =		. ਪ		X	43=		OR	X86=	176
М	JLTIPLE DEPEI	NDENT CLAIM P	RESENT				-1	45=	•	OR	-290=	
* 1	f the difference	e in column 1 is	less than zero, enter "0" in colu			column 2	TC	TAL		OR	TOTAL	
	C	(Column 1)	MENDED - PART II (Column 2)			(Column 3)	SM	ALL	ENTITY	OR	OTHER SMALL	
ENT A	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	. R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total		Minus	**		=	XS	9=		OR	XS18=	
	Independent		Minus	***	C: A!!!] =	X	3=		OR	X86=	
<u> </u>	FIRST PRESE	ENTATION OF MI	JUIPLE DE	PENDENI	CLAIM		+1-	45=		OR	+290=	
										OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	າກ 2)	(Column 3)	ADDI*	. • LL	t	•		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	##		=	xs	9=.		OR	X\$18=	
AMENDMENT	Incependent		Minus	***	0. 4.14	=	X4	3=		OR-	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+14	5=		OR	+290=	
							ADDIT	FEE	• • •	OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
ENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***	I	= .	X4:	3=			X86=	
٧	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM				· · ·	OR		
* If the entry in column 1 is less than the entry in column 2 write 10° in column 3										OR	+290=	•
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Paid					found in t	ne app	ropriate box	in colu	ımn 1.	

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